POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	123 01
FORMALITY REVIEW	MT	523	02/01/01
RESPONSE FORMALITY REVIEW	SGH	1091	9-20-01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	12/9	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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